



**U.S. Department of Homeland Security**  
U.S. Immigration and Customs Enforcement  
Office of Professional Responsibility  
Inspections and Detention Oversight Division  
Washington, DC 20536-5501

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**Office of Detention Oversight  
Follow-Up Compliance Inspection**

**Enforcement and Removal Operations  
ERO Salt Lake City Field Office**

**Nye County Detention Center  
Pahrump, Nevada**

**May 10-14, 2021**

**FOLLOW-UP COMPLIANCE INSPECTION**  
**of the**  
**NYE COUNTY DETENTION CENTER**  
Pahrump, Nevada

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## **FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS**



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## FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Nye County Detention Center (NCDC) in Pahrump, Nevada, from May 10 to 14, 2021.<sup>1</sup> This inspection focused on the standards found deficient during ODO’s last inspection of NCDC from November 30 to December 4, 2020. NCDC opened in 2012, is owned by Nye County, and is operated by the Nye County Sheriff’s Office. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at NCDC in August 2019 under the oversight of ERO’s Field Office Director (FOD) in Salt Lake City (ERO Salt Lake City). The facility operates under the National Detention Standards (NDS) 2019.

ERO Salt Lake City has not assigned deportation officers (DO) nor a detention services manager to NCDC. An NCDC captain handles daily facility operations and manages █ support personnel. Summit provides food and commissary services, and Serenity Health provides medical care at NCDC. NCDC does not hold any accreditations from any outside entities.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	100
Average ICE Detainee Population <sup>3</sup>	█
Male Detainee Population (as of May 10, 2021)	█
Female Detainee Population (as of May 10, 2021)	█

During its last inspection, in December 2020, ODO found 11 deficiencies in the following areas: Admission and Release (1); Custody Classification System (1); Funds and Personal Property (2); Special Management Units (3); Religious Practices (1); and Visitation (3).

<sup>1</sup> This facility holds male and female detainees with low, medium-low, medium-high, and high-security classification levels for periods longer than 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of May 10, 2021.

<sup>3</sup> *Ibid.*

## **FOLLOW-UP COMPLIANCE INSPECTION PROCESS**

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO's arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection's Uniform Corrective Action Plan, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as "Repeat Deficiencies" in this report.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic, and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.

## FINDINGS BY NATIONAL DETENTION STANDARDS 2019 MAJOR CATEGORIES

NDS 2019 Standards Inspected <sup>4&amp;5</sup>	Deficiencies
<b>Part 1 – Safety</b>	
Environmental Health and Safety	0
<b>Sub-Total</b>	<b>0</b>
<b>Part 2 – Security</b>	
Admission and Release	1
Custody Classification System	0
Funds and Personal Property	2
Use of Force and Restraints	4
Special Management Units	1
<b>Sub-Total</b>	<b>8</b>
<b>Part 4 – Care</b>	
Food Service	0
Hunger Strikes	0
Medical Care	3
Significant Self-Harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>3</b>
<b>Part 5 - Activities</b>	
Religious Practices	0
Visitation	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>11</b>

<sup>4</sup> For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.

<sup>5</sup> Beginning in FY 2021, ODO added Emergency Plans, Facility Security and Control, Population Counts, Hunger Strikes, and Staff Training as core standards. NDS 2019 does not include Emergency Plans, Population Counts, nor Staff Training as individual standards; however, those specific requirements are resident in other core standards.

## DETAINEE RELATIONS

ODO interviewed 12 detainees, who each voluntarily agreed to participate. One detainee made an allegation of abuse by another detainee and was satisfied with NCDC's actions and handling of the incident. Most detainees reported satisfaction with facility services except for the concerns listed below. ODO attempted to conduct detainee interviews via video teleconference; however, ERO Salt Lake City and NCDC were not able to accommodate this request due to technology issues. As such, the detainee interviews were conducted via telephone.

*Admission and Release:* Four out of 12 detainees stated they did not receive instructions on how to access the ICE and local NCDC detainee handbooks upon admission to NCDC. Furthermore, the detainees stated the handbooks were not in their native languages and they did not fully understand them.

- Action Taken: ODO reviewed the NCDC Detainee Handbook policy and NCDC Detainee Handbook Viewed Report and interviewed the NCDC lieutenant. ODO found the NCDC Handbook Viewed Report documented the dates all four detainees acknowledged having read and understood the handbooks on the electronic tablets. The NCDC lieutenant stated the staff provided all detainees with language line assistance during the intake process and informed them in their native languages how to contact an NCDC officer for assistance with future translation needs. On May 12, 2021, an NCDC deputy offered each detainee the use of the language line to further clarify the ICE National Detainee and NCDC detainee handbooks. Additionally, NCDC provided the four detainees with paperback copies of the NCDC detainee handbook in their native languages.

*Medical Care:* One detainee stated his dissatisfaction with NCDC medical treatment for his stomach pain and rectal bleeding. Additionally, the detainee stated he should have received more testing for back pain from a previous fall.

- Action Taken: ODO spoke with the NCDC registered nurse (RN) and the NCDC office supervisor and reviewed the detainee's medical record. On April 18, 2021, the detainee submitted a sick call request for "burning" in his stomach and stated the pain affected his ability to walk about the housing unit. On the same day, the NCDC nursing staff found no abnormalities after evaluating the detainee, and the NCDC staff later observed the detainee walking and bounding up and down stairs within the housing unit without difficulty. On April 19, 2021, the detainee submitted another sick call request for rectal bleeding and stomach pain due to complications from his Ramadan religious fasting. On the same day, an NCDC nurse observed no blood in the detainee's stools after his bowel movement; however, the NCDC provider reviewed the detainee's chart and sick call requests and ordered the collection of blood samples. On April 20, 2021, the detainee completed his lab testing, and the NCDC nursing staff prescribed the detainee a stool softener to relieve straining during defecation. On April 22, 2021, the detainee's laboratory results confirmed no abnormalities, and the RN notified him of the results. On April 27, 2021, the detainee submitted a sick call request for blood in his stool and burning when defecating. The RN evaluated him that same day, noting hemorrhoid symptoms. The RN offered to order suppositories for the detainee, but he refused for

no stated reason. From April 20, 2021 to May 12, 2021, the detainee took his stool softener for 21 out of 22 scheduled times and had not returned to sick call.

Regarding the detainee's back complaint on February 24, 2021, the detainee allegedly slipped and fell while mopping the floor at the Tonopah Detention Center (TDC) in Tonopah, Nevada. The NCDC medical transcripts revealed the TDC medical staff treated the detainee on the same day and prescribed a hot water bottle for hip pain and Tylenol three times daily. Additionally, the NCDC medical records noted that the TDC medical staff observed the detainee walking about the facility without pain after the medical examination. On March 31, 2021, the detainee returned to ICE custody at NCDC, and the NCDC medical records revealed no evidence the detainee submitted any medical requests for back pain during his subsequent treatment for stomach and rectal complaints. The NCDC medical records confirmed the detainee submitted approximately 47 medical requests for various complaints since his initial admission to NCDC on August 6, 2019 and made full use of the sick call request process for any additional medical issues.

*Medical Care:* One detainee stated he received medical treatment for undisclosed symptoms and the NCDC medical staff instructed him to undergo further laboratory testing. The detainee added he had not been called for the laboratory testing and expressed concern his symptoms may worsen.

- Action Taken: ODO discussed the detainee's medical record with the NCDC RN and NCDC office supervisor. On April 24, 2021, the detainee submitted a sick call request for painful urination symptoms. On April 26, 2021, the NCDC nursing staff evaluated the detainee and conducted a urinalysis which returned with normal results. On April 27, 2021, the NCDC provider evaluated the detainee and did not document any abnormal findings nor prescribe any medications; however, the provider interviewed the detainee and ordered further laboratory testing that the detainee completed on May 11, 2021. On May 12, 2021, the NCDC medical staff notified the detainee of his scheduled telehealth appointment for May 14, 2021, to discuss his lab results. After the conclusion of the inspection, ODO confirmed the NCDC medical staff met with the detainee for his scheduled appointment, discussed his lab results, treated him with antibiotics, and decided on no follow-up or additional medications for him.

*Medical Care:* One detainee stated his dissatisfaction with NCDC medical treatment for an eye irritation.

- Action Taken: ODO discussed the detainee's medical record with the NCDC RN and office supervisor. On May 1, 2021, the detainee submitted a sick call request for blurry vision, irritated eyes, and redness. On the same day, the NCDC nursing staff evaluated the detainee and noted no redness, edema, or drainage. On May 4, 2021, the NCDC provider further evaluated the detainee, documented no conjunctival irritation nor watering of the eyes during the visit, and therefore did not request a referral to an optometrist. On May 11, 2021, following the ODO interview, the NCDC nursing staff informed the detainee on the availability of over-the-counter eye drops at the NCDC commissary and his option to submit another sick call request if his symptoms persisted.



*Religious Practices:* One detainee stated that NCDC did not accommodate his request for a halal and kosher diet multiple times over the previous two years.

- Action Taken: ODO interviewed the NCDC lieutenant and reviewed food service documentation. On September 2, 2019, the detainee submitted a written request for a halal diet due to his Muslim beliefs, and an NCDC sergeant approved the common fare menu the next day. On December 5, 2019, the detainee submitted a written request to verify the authenticity of the halal menu and for NCDC to provide him with an authentic halal menu or a substitute kosher menu. (He considered the two diets as interchangeable per his religious beliefs.) On December 8, 2019, an NCDC sergeant approved the common fare kosher diet in addition to the halal diet to satisfy the detainee and to provide him with flexible menu options. Between January 23, 2020, and October 17, 2020, the detainee submitted five additional written requests to verify the authenticity of both the halal and kosher common fare menus, and the NCDC staff reconfirmed the authenticity and approval of the religious menus. ODO verified that the NCDC registered dietician conducted a certified nutritional analysis of the NCDC common fare menus and approved all diets. ODO confirmed compliance of NCDC religious common fare menus with NDS 2019 requirements. Additionally, ODO reviewed the Inmate Special Diet List and verified the detainee was still receiving the halal and kosher diets during the ODO inspection period. On May 13, 2021, an NCDC officer again explained to the detainee the halal and kosher menus and confirmed the detainee's understanding of both menus.

*Staff-Detainee Communication:* One detainee stated he did not receive a response from his ERO Salt Lake City DO after submitting a request for a case update on or about May 5, 2021.

- Action Taken: ODO spoke with the ERO Salt Lake City supervisory detention and deportation officer and the NCDC lieutenant and reviewed the ICE Detainee Request forms. On May 7, 2021, the detainee submitted a written request to determine the name of his DO, and ERO Salt Lake City provided that information to the detainee on May 11, 2021. On May 13, 2021, the DO met with the detainee at NCDC and provided him a case update.

## **FOLLOW-UP COMPLIANCE INSPECTION FINDINGS**

### **SECURITY**

#### **ADMISSION AND RELEASE (AR)**

ODO reviewed the NCDC booking procedure policy, interviewed an NCDC deputy, reviewed detainee detention files, and found [REDACTED] files did not contain ICE Order to Detain forms (Forms I-203) (**Deficiency AR-18<sup>6</sup>**).

*Corrective Action:* On May 13, 2021, NCDC initiated corrective actions by providing ODO with copies of the three missing ICE Order to Detain forms (Form I-203). On the

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<sup>6</sup> “Official documentation from ICE/ERO (e.g., Form I-203, I-203a, or I-216) shall accompany each newly arriving detainee...” See ICE NDS 2019, Standard, Admission & Release, Section (II)(F).

same day, the NCDC lieutenant issued guidance by email to all NCDC intake staff, reiterating the requirement to obtain all detainee documentation from ERO Salt Lake City during the intake process. The written guidance also included a procedure for the NCDC staff to use when ERO Salt Lake City did not provide all intake documentation (C-1).

## FUNDS AND PERSONAL PROPERTY (FPP)

ODO interviewed an NCDC sergeant, reviewed the NCDC property intake/release process policy and directives, and found NCDC written procedures did not reference the supervisory staff to conduct the investigation of lost or damaged property (Deficiency FPP-30<sup>7</sup>).

*Corrective Action:* On May 13, 2021, the NCDC lieutenant updated the NCDC directive to include a written procedure stating the supervisory staff would conduct any lost or missing property investigations. On the same day, the NCDC lieutenant issued the updated directive to all NCDC staff by email for immediate implementation (C-2).

ODO reviewed the NCDC property intake/release process policy and directives and found NCDC written procedures did not include prompt reimbursement to a detainee for lost property due to facility negligence (Deficiency FPP-31<sup>8</sup>).

*Corrective Action:* On May 13, 2021, the NCDC lieutenant updated the NCDC directive to include a written procedure stating NCDC will promptly reimburse detainees for lost property due to facility negligence. On the same day, the NCDC lieutenant issued the updated directive to all NCDC staff by email for immediate implementation (C-3).

## USE OF FORCE AND RESTRAINTS (UOFR)

ODO interviewed the NCDC lieutenant, reviewed [REDACTED] UOF file, and found no examination by the medical staff of the detainee, following the UOF incident (Deficiency UOFR-51<sup>9</sup>).

ODO interviewed the NCDC lieutenant, reviewed [REDACTED] UOF file, and found no documented medical examination of the detainee following the UOF incident (Deficiency UOFR-52<sup>10</sup>).

ODO reviewed [REDACTED] UOF file and found the NCDC administrator received the report [REDACTED] days after the incident, instead of within the required [REDACTED] working days of the incident (Deficiency UOFR-90<sup>11</sup>).

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<sup>7</sup> “Each facility shall have a written policy and procedure for detainee property reported missing or damaged.  
2. Supervisory staff will conduct the investigation;”

See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(F)(2).

<sup>8</sup> “Each facility shall have a written policy and procedure for detainee property reported missing or damaged.

3. The facility will promptly reimburse detainees for all validated property losses caused by facility negligence;”

See ICE NDS 2019, Standard, Funds and Personal Property, Section (II)(F)(3).

<sup>9</sup> “After any use of force or application of restraints, medical personnel shall examine the detainee, immediately treating any injuries...” See ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(G)(3).

<sup>10</sup> “...The medical services provided shall be documented.” See ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(G)(3).

<sup>11</sup> “The facility review team shall complete and submit its report to the facility administrator within [REDACTED] working days

ODO reviewed [REDACTED] UOF after-action report and found that NCDC submitted the report to the ERO Salt Lake City FOD after [REDACTED] days, instead of within the required [REDACTED] days of completion (**Deficiency UOFR-93<sup>12</sup>**).

## **SPECIAL MANAGEMENT UNITS (SMU)**

ODO reviewed [REDACTED] disciplinary segregation files and found NCDC conducted [REDACTED]-day reviews of detainees in disciplinary segregation; however, the reviews did not confirm the provision of showers, meals, recreation, and other basic necessities for the detainees (**Deficiency SMU-46<sup>13</sup>**).

## **CARE**

### **MEDICAL CARE (MC)**

ODO reviewed [REDACTED] detainee medical records and found the NCDC medical staff did not conduct comprehensive health assessments, including physical examinations and mental health screenings within [REDACTED] days of arrival for [REDACTED] detainees. Specifically, the [REDACTED]-day health assessments were completed between [REDACTED] after the detainees arrived at NCDC (**Deficiency MC-27<sup>14</sup>**).

ODO reviewed [REDACTED] detainee medical records and found the NCDC medical staff did not conduct initial dental screening exams within [REDACTED] days of arrival to the facility for [REDACTED] detainees. Specifically, the [REDACTED]-day initial dental screenings were completed between [REDACTED] days after the detainees arrived at NCDC (**Deficiency MC-43<sup>15</sup>**).

ODO interviewed the NCDC health services administrator, reviewed [REDACTED] NCDC staff training records, and determined a dentist did not conduct annual training for non-dental clinicians on how to conduct initial dental screenings. Specifically, the physician and nurse practitioner conducted initial dental exams without the prior annual training for conducting such an exam (**Deficiency MC-45<sup>16</sup>**).

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of the incident or the detainee's release from restraints..." See ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(J)(5).

<sup>12</sup> "...The facility shall forward a copy of the After-Action Report to the local ICE/ERO Field Office Director within seven days of completion." See ICE NDS 2019, Standard, Use of Force and Restraints, Section (II)(J)(5).

<sup>13</sup> "A security supervisor, or equivalent, shall interview the detainee and review his or her status in disciplinary segregation every [REDACTED]. The review will confirm the detainee is being provided showers, meals, recreation, and other basic necessities, as required by this detention standard..." See ICE NDS 2019, Standard, Special Management Units, Section (II)(B)(3)(a).

<sup>14</sup> "The facility will conduct and document a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within [REDACTED] of the detainee's arrival at the facility..." See ICE NDS 2019, Standard, Medical Care, Section (II)(E).

<sup>15</sup> "An initial dental screening exam shall be performed within [REDACTED] of the detainee's arrival..." See ICE NDS 2019, Standard, Medical Care, Section (II)(H).

<sup>16</sup> "...Such non-dental clinicians shall be trained annually on how to conduct the exam by a dentist..." See ICE NDS 2019, Standard, Medical Care, Section (II)(H).

## CONCLUSION

During this inspection, ODO assessed the facility's compliance with 12 standards under NDS 2019 and found the facility in compliance with 7 of those standards. ODO found 11 deficiencies in the remaining 5 standards. ODO commends facility staff for its responsiveness during this inspection and notes there were three instances where staff initiated immediate corrective action during the inspection. ODO recommends ERO Salt Lake City work with NCDC to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>First FY 2021 (NDS 2019)</b>	<b>Second FY 2021 (NDS 2019)</b>
Standards Reviewed	19	12
Deficient Standards	6	5
Overall Number of Deficiencies	11	11
Repeat Deficiencies	5	0
Areas of Concern	0	0
Corrective Actions	0	3